No. <b>W 80108</b>		Due no later than Dec 31, 2016			2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form  1. Mailing Address: Correct in this box if needed.  KRISTY KUEHFUSS, PHD, PLLC  KRISTY KUEHFUSS PHD  3425 SYRINGA DR  LEWISTON ID 83501		342 LEV	KRISTY KUEHFUSS PHD 3425 SYRINGA DR LEWISTON ID 83501  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE  4. Limited Liability Companies: Enter Nar		mes and Addresse	s of at least one Member or Manager					
Office Held	Name	mes and made esse.	Street or PO Address	City		State	Country	Postal Code
MANAGER	KRISTY A KUEHFUSS		3425 SYRINGA DR	LEW:	ISTON	ID	USA	83501
5. Organized Under the Laws of:  ID  W 80108		6. Annual Report must be signed.* Signature: Kristy Kuehfuss			Date: 10/30/2016			
Processed 10/30/2016		Name (type or print): Kristy Kuehfuss  * Electronically provided signatures are accepted as original signatures.						